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7590 05/28/2011 STAAS & HALSEY LLP SUITE 700 1201 NEW YORK AVENUE, N.W.

WASHINGTON, DC 20005

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(Depositor's name) (Signature (Date

FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO APPLICATION NO. FILING DATE KEITH LYNN PUTNAM 2454.1129 6575 09/175 156 10/19/1998

TITLE OF INVENTION: METHOD AND SYSTEM FOR PROVIDING CUSTOMIZED AUDIO RESPONSES TO INCOMING PHONE CALLS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1510	\$0	\$0	\$1510	09/28/2011	
EXAMINER		ART UNIT	CLASS-SUBCLASS				
PHAN, JOSEPH T		2614	379-067100	-			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.563). Change of correspondence address (or Change of Correspondence Address form PTOSB122) attached. "Fee Address" indication (or "Fee Address" Indication form PTOSB147; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,			STAAS & HALSEY LLP	
			(2) the name of a single firm (having as a member registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name i listed, no name will be printed.		n to		

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filling an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

SIEMENS AKTIENGESELLSCHAFT

MUNICH, GERMANY

Please check the appropriate assignee category or categories (will not be printed on the patent) : 🔲 Individual 🗷 Corporation or other private group entity 🚨 Government 4a. The following fee(s) are submitted: 4b. Payment of Fec(s): (Please first reapply any previously paid issue fee shown above) X Issue Fee A check is enclosed. E Payment by credit card. Form: PPG-2038-is attached == Publication Fee (No small entity discount permitted) The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overnayment. to Denosit Account Number 19-3935 (enclose an extra copy of this form). Advance Order - # of Copies

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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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AARON C. WALKER Typed or printed name Registration No.

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